



Division of Laboratory Services  
630 Hart Lane  
Nashville, TN 37216  
615-262-6300

<https://www.tn.gov/health/health-program-areas/lab.html>

**Disease/Agent Suspected or Test Requested:**

***Clostridium difficile***

<b>Provider Requirements</b>	<ul style="list-style-type: none"><li>• Davidson County residents only - specimen requested as determined by EIP</li></ul>
<b>Acceptable Specimen Sources/Type(s) for Submission</b>	<ul style="list-style-type: none"><li>• Stool</li></ul>
<b>TDH Requisition Form Number</b>	<a href="#"><u>PH-4182</u></a>
<b>Media Requirements</b>	Collection swabs with liquid Stuart's medium
<b>Special Instructions</b>	<ul style="list-style-type: none"><li>• Plunge collection swab into stool sample in several locations; after sampling return the swab to the tube</li><li>• Store swabs at -20 C until selected for shipment for further testing</li></ul>
<b>Shipping Instructions</b>	<ul style="list-style-type: none"><li>• Frozen (preferred)</li><li>• Refrigerated at 4 C</li></ul>
<b>Laboratory Section Performing Testing</b>	Bacteriology
<b>Lab Location(s) Performing Test</b>	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).